

REQUEST FOR CHANGE

**Notes:** If your company has moved to a new location, then you must submit a new EPA Notification of Hazardous Waste Activity Form and you must obtain a new US EPA Identification Number.

The numbering on this form corresponds to the numbering on EPA Notification of Hazardous Waste Activity Form.

EPA ID Number: CT D983888090

Company Name: Scott & Daniells, Inc.

Date of Request: 2/25/00

Town: Portland

SECTION/ITEM TO BE CHANGED	CURRENT INFORMATION	CHANGE INFORMATION TO:	REASON/ COMMENTS
I. Name of Installation			
II. Location of Installation			
III. Mailing Address of Installation			
IV.a. Installation Contact's Name	Charles Griesbach	Robert Papa	Retired
b. Installation Contact's Title	Vice President	V.P. of Manufacturing	
c. Installation Contact's Phone			
V.a. Ownership			
b. Property Owner			
VI. Status			
Originally notified as: (please circle) CESQG ( <100 kg/month )  SQG (100 - 1000 kg/month)  LQG ( >1000 kg/mth)  Transporter  T/S/D Facility		Change Status to:	

RECEIVED

MAR 27 2000

WASTE MANAGEMENT BUREAU  
Hazardous Waste Management & Enforcement

REQUEST FOR CHANGE

**Note:** If your company has moved to a new location, then you must submit a new EPA Notification of Hazardous Waste Activity Form and you must obtain a new US EPA Identification Number.

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EPA ID Number: CT D983888090 Company Name: SCOTT & DANIELLS INC

Date of Request: 3/24/00 Town: PORTLAND

SECTION/ITEM TO BE CHANGED	CURRENT INFORMATION	CHANGE INFORMATION TO:	REASON/ COMMENTS
I. Name of Installation			
II. Location of Installation			
III. Mailing Address of Installation			
IV.a. Installation Contact's Name	CHARLES GRIESBACH	ROBERT PAPA	PER 99 SQG REPORT
b. Installation Contact's Title			
c. Installation Contact's Phone			
V.a. Ownership			
b. Property Owner			
VI. Status  Originally notified as: (please circle) CESQG ( <100 kg/month )  SQG (100 - 1000 kg/month)  LQG ( >1000 kg/mth)  Transporter  T/S/D Facility		Change Status to:	

65  
3.31.00

REQUEST FOR CHANGE

Note: If your company is moved to a new location, then you must submit a new EPA Notification of Hazardous Waste Activity Form and you must obtain a new US EPA Identification Number.

The numbering on this form corresponds to the numbering on EPA Notification of Hazardous Waste Activity Form.

EPA ID Number: CTD 983888090

Company Name: SCOTT & DANIELLS INC

Date of Request: 7/31/95

Town: PORTLAND

SECTION/ITEM TO BE CHANGED	CURRENT INFORMATION	CHANGE INFORMATION TO:	REASON/ COMMENTS
I. Name of Installation			
II. Location of Installation	FREESTONE AVE PORTLAND CT 064800316	264 FREESTONE AVE, PORTLAND, CT 06480	PER 93 SQG REPORT ADD HOUSE #
III. Mailing Address of Installation	FREESTONE AVE PORTLAND CT 064800316	264 FREESTONE AVE PORTLAND CT 06480	
IV.a. Installation Contact's Name			
b. Installation Contact's Title			
c. Installation Contact's Phone			
V.a. Ownership			
b. Property Owner			
VI. Status  Originally notified as: (please circle) SQG ( <100 kg/month )  SQG (100 - 1000 kg/month)  Generator ( >1000 kg/mth)  Transporter  T/S/D Facility		Change Status to:	

0-8-95  
JP



ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER

+ CTD983888090

INSTALLATION ADDRESS

SCOTT & DANIELLS INC  
PO BOX 306  
PORTLAND

CT 06480

FREESTONE AVE  
PORTLAND

CT 06480

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



# Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received  
(For Official Use Only)

AUG 30 1991

910830

## I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification

B. Subsequent Notification  
(complete item C)

C. Installation's EPA ID Number

210983888090

## II. Name of Installation (Include company and specific site name)

S C O T T &amp; D A N I E L L S I N C

## III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

F R E E S T O N E A V E N U E

Street (continued)

City or Town

P O R T L A N D

State

C T

ZIP Code

0 6 4 8 0 - 0 3 0 6

County Code

County Name

007

M I D D L E S E X C O U N T Y

## IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

P O B O X 3 0 6

City or Town

P O R T L A N D

State

C T

ZIP Code

0 6 4 8 0 - 0 3 0 6

## V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

(first)

G R I E S B A C H

C H A R L E S

Job Title

Phone Number (area code and number)

V I C E P R E S I D E N T

2 0 3 - 3 4 2 - 1 9 3 2

## VI. Installation Contact Address (See Instructions)

A. Contact Address  
Location Mailing

B. Street or P.O. Box

X

City or Town

State

ZIP Code

## VII. Ownership (See Instructions)

## A. Name of Installation's Legal Owner

D A V I D P R E S T O N

Street, P.O. Box, or Route Number

P O B O X 3 0 6

City or Town

P O R T L A N D

State

C T

ZIP Code

0 6 4 8 0 - 0 3 0 6

Phone Number (area code and number)

2 0 3 - 3 4 2 - 1 9 3 2

B. Land Type

P

C. Owner Type

P

D. Change of Owner  
Indicator

Yes

No

X

(Date Changed)  
Month Day Year

ID - For Official Use Only

## VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions.)

## A. Hazardous Waste Activity

1. Generator (See Instructions)
- ☐ a. Greater than 1000kg/mo (2,200 lbs.)
- ☒ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
- ☒ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes
- Mode of Transportation
- ☐ 1. Air
- ☐ 2. Rail
- ☒ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify
- ☐ 3. Treater, Storer, Disposer (at installation)  
Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Burner - indicate device(s) - Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

## B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
- ☒ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner - indicate device(s) - Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

## IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒
2. Corrosive (D002) ☐
3. Reactive (D003) ☐
4. EP Toxic (D000) ☐
- (List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))
- 

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
F 0 0 2					
7	8	9	10	11	12

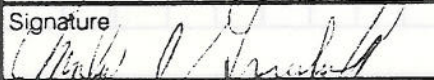
C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

1	2	3	4	5	6

## X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature



Name and Official Title (type or print)

Charles J. Griesbach, V. P. Mfg.

Date Signed

8/27/91

## XI. Comments



ACKNOWLEDGEMENT OF NOTIFICATION  
OF HAZARDOUS WASTE ACTIVITY  
(VERIFICATION)

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EPA I.D. NUMBER

+CTD065523342

INSTALLATION ADDRESS

SCOTT ELETROKRAFTS INC  
PO BOX 158  
ANDOVER

CT 06232

22 ROUTE 6  
ANDOVER

CT 06232



ID — For Official Use Only														
C													T/A	C
W														1

# X. Description of Hazardous Wastes (continued from front)

A. Hazardous Wastes from Nonspecific Sources. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from nonspecific sources your installation handles. Use additional sheets if necessary.

1 F001	2	3	4	5	6
7	8	9	10	11	12

B. Hazardous Wastes from Specific Sources. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48

D. Listed Infectious Wastes. Enter the four-digit number from 40 CFR Part 261.34 for each hazardous waste from hospitals, veterinary hospitals, or medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
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E. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.21 — 261.24)

☐ 1. Ignitable  
(D001)

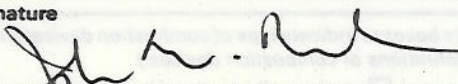
☐ 2. Corrosive  
(D002)

☐ 3. Reactive  
(D003)

☒ 4. Toxic  
(D000)

# XI. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

Signature  


Name and Official Title (type or print)  
JOHN M. BRAND MFG. MGR

Date Signed  
8/29/88

EPA Form 8700-12 (Rev. 11-85) Reverse

RECEIVED

SEP 01 1988

HAZARDOUS MATERIALS  
MANAGEMENT UNIT